

**PART B - FEE(S) TRANSMITTAL**

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7590 03/15/2010

Edwin V Merkel  
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 Rochester, NY ~~14603~~ 14604

**Certificate of Mailing or Transmittal**  
 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/525,266 04/25/2006 Huy Ong ~~30917340~~ 4952

TITLE OF INVENTION: GROWTH HORMONE-RELEASING PEPTIDES IN THE TREATMENT OF PREVENTION OF ATHEROSCLEROSIS AND HYPERCHOLESTEROLEMIA

51796/100 (VAL-301-US)

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEES DUE	DATE DUE
nonprovisional	<del>NO</del> YES	\$150 755	\$300	\$0	\$1840 1055	06/15/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
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MACFARLANE, STACEY NEE 1649 424-009100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Nixon Peabody LLP

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

See attachment.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies

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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 441138 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Edwin V. Merkel  
 Typed or printed name Edwin V. Merkel

Date June 15, 2010  
 Registration No. 40,087

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**ATTACHMENT TO FORM PTOL-85, PART B  
ISSUE FEE TRANSMITTAL FORM**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT

<b>(A) NAME OF ASSIGNEE</b>  Valorisation-Recherche, Société en Commandite	<b>(B) RESIDENCE (CITY and STATE OR COUNTRY)</b>  Montréal, CANADA
<input checked="" type="checkbox"/> Corporation or other private group entity	
<b>(A) NAME OF ASSIGNEE</b>  Valorisation HSJ, Société en Commandite	<b>(B) RESIDENCE (CITY and STATE OR COUNTRY)</b>  Montréal, CANADA
<input checked="" type="checkbox"/> Corporation or other private group entity	